Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10-800500

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL	
TOTAL CLAIMS			41					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			ム mir	nus 20=	* O		·	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ mi	nus 3 =	* O			X43=	•	OR	X86=	,
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than zero, enter "0" in colu			olumn 2	ľ	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II										•	OTHER	
(Column 1)				(Colum		(Column 3)	1 -	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	int		=		X\$ 9=	·	OR	X\$18=	
AME	Independent	*	Minus	***	CL AINA	=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							L	TOTAL		OR	TOTAL	
(Column 1) (Column 2) (Column 3)								DDIT. FEE		JON ,	ADDIT. FEE	
		(Column 1) CLAIMS		HIGH		(Column 3)	1 -		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE_		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus .	***	CI 414	= .		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENI	CLAIM	· [' [+145=		OR	+290=	
								TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	
	•	(Column 1)										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER . USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	#	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.".										TOTAL	
		mber Previously Pa mber Previously Pa					AI	TOTAL DDIT. FEE		OR ,	DOIT. FEE	
		ber Previously Paid					r foun	d in the app	ropriate box	in colu	ımn 1.	